PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

108.08369

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS			9				.	RATE	FEE	7	RATE	FEE.	
F	OR .		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TO	OTAL CHARGE	ABLE CLAIMS	9 minus 20=		· 0			X\$ 9=		OR	X\$18=	,	
INI	DEPENDENT C	CLAIMS	6 minus 3 = *3					X43=		OR	X86=	258	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						į	TOTAL		OR	TOTAL	1028		
CLAIMS AS AMENDED - PART II								OTHER THAN					
(Column 1)			,	(Colum		(Column 3) SMAL		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	ENTATION OF M	ULTIPLE DEI	PENDENT	CLAIM			+145=		OR	+290=		
								TOTAL			TOTAL		
	(Column 1) (Column 2) (Column 2)							DDIT. FEE			ADDIT. FEE		
_		(Column 1)	·	(Colum HIGHE	_	(Column 3)	1 -			1 f		1001	
18					NUMBER PRESENT FXTRA			RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
EN		AMENDMENT		PAID F		EXTRA			FEE			FEE	
AMENDMENT B	Total	*	Minus	**		= :		X\$ 9=		OR	X\$18=		
	Independent			***	2	-		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+145=		OR	+290=		
								TOTAL		L	TOTAL	•	
	•				•			DDIT. FEE		OR A	DDIT. FEE		
		(Column 1) ·		(Columi		(Column 3)	i _	•					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R JSLY	PRESENT EXTRA		RATE	ADDI: TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent				=		X43=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									⁵			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								•	OR A	TOTAL DDIT, FEE	. •	
. 1	rme "Highest Nur he "Highest Nurr	mber Previously Pa ber Previously Paid	ud For IN THIS I For (Total or	S SPACE is I Independen	ess thair t) is the	3, enter "3." highest number		: -	opriate box				